



6000
20 Apr 2009

MEMORANDUM

From: LTJ G. ALLEN, Clinic Administrator
CG ATC

To: CG ATC
Thru: (1) CG ATC (hsd)
(2) CG ATC (xo)

Subj: PATIENT ADVISORY COMMITTEE MEETING MINUTES FOR 17 APR 2009

1. The Patient Advisory Committee (PAC) was convened at 1030 on 17 Apr 2009. Attendees present were:

Mrs. Tara Dunn (TRICARE Service Center)
AN Matthew Huey (ATC) HSC Jerry Cade (ATC)
Mr. Shane Pierce, RN (ATC) LT John G. Allen (ATC)

2. Old Business:

a. None

3. New Business:

a. None. We were prepared to discuss the topics contained in enclosure (1).

4. We are unsure of the reason for the poor turnout-we posted flyers, sent base wide email reminders to all hands, and passed the information at two Command staff meetings. Strong attendance seems to go in cycles: when the Command directs a rep from each Division to attend, we will see improved attendance. The next quarter, we will typically see fewer attendees. Although it is difficult to pinpoint an exact reason for the poor attendance, I only can only speculate that people choose not to attend because the either have no interest in the topics we are presenting or have no complaints that have not been addressed previously. Further, personnel that arrived last summer have figured out how we do business and have over time made suggestions to us on how to better meet their needs; the up chit clinic and PHA changes are prime examples. Because of these trends, over the years we have attempted to make the PAC educational and interactive. For instance, in the past we have brought in speakers to discuss breast cancer awareness or cardiac risks to entice greater attendance. In all instances, we've had limited success. We've even tried outreach after hours: last fall, the XO arranged for an after hours presentation and no one attended the meeting. We've attempted to partner with MASC, but there is not a great interest. All of these situations are understandable, but we will continue to move forward with continually trying to find ways to enhance attendance at the PAC. I will contact MOAA Mobile to see if there is an interest in some sort of partnership or health care related event. With the numerous proposed changes to our complex health benefit from Congress, it might be a good opportunity. The next PAC will be scheduled for late June, just in time for transfer season.

Subj PATIENT ADVISORY COMMITTEE MEETING
MINUTES FOR 17 APR 2009

6000
20 Apr 2009

Enclosures: (1) PAC Meeting agenda, handouts & PPT for 17 Apr 2009
(2) Attendance Rosters for 17 Apr 2009

Copy: Patient Advisory Committee

ATC MOBILE CLINIC PATIENT ADVISORY COMMITTEE MEETING

17 Apr 2009

ATTENDANCE ROSTER

NAME/Rank	UNIT and Division	CONTACT INFO (E-mail, phone, etc.)
1. Ann Duran	Training Rep.	800-404-5445 x3975
2. Jerry Cade	ATC MED	441-6114
3. SHANE PIERCE	ATC MED	441-6113
4. Matthew Huey / #3	ATC 144 Line Shop	x5863
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Encl (1)

Patient Advisory Committee Meeting April 17, 2009



Agenda

- Introduction
- Update on Clinic Staffing
- Patient Responsibility for Referrals Management
- Review of Clinic Services
- Overview of Periodic Health Assessments (PHAs)
- TRICARE News and Updates
- Beneficiary Feedback, Closing Comments, and Questions



Update on Clinic Staffing

- LT Christina Medrano retirement scheduled for April 24, 2009
 - Her replacement is LT Bryan Oditt, arriving from CGAS Borinquen
- HS departures:
 - HS1 Mueller, HS1 Daly, and HS1 Breeden
- HS arrivals:
 - HSC Gipson arriving July
 - Three HS1s arriving over the summer

Mr. Shane Pierce

What To Do When You Receive A Referral

- You will receive a handout from Ms. Jean Lulue explaining the steps you need to take obtain an appointment for a referral
- This process will not apply to emergent or urgent referrals
- See handout

Review of Clinic Services

Review of Key Clinic Services

- Vasectomy Services
 - Requires two appointments:
 - First appointment is for counseling and obtaining consent
 - Second appointment is for procedure to be performed
 - Requires patient acknowledgement that CG will not pay for a reversal in non-federal facilities



Encl (2)

Review of Key Clinic Services

- Many patients not aware clinic has after hours duty HS
 - Duty HS available for acute/urgent care: 441-6410
 - Has contact with medical officer and other staff members to address after hours issues
- TRICARE On line
 - Can make medical appointments online
 - Requires registration at <http://www.tricareonline.com>
 - Focus is same day appointments



Review of Key Clinic Services

- Walk in up chit clinic expanded to include Mondays (0720-0800) and Thursdays (1415-1450):
 - Target audiences for the clinic are:
 - Day and night shift personnel who are in need of an up chit.
 - Newly arriving ATC aviation personnel. Note: All personnel checking into ATC must meet with the flight surgeon or aviation physician assistant to obtain an up chit PRIOR to participating in flight duties.
 - Appointments will still be available, but this provides an additional means to obtain an up chit.



About the PHA

What is the PHA?

- The Periodic Health Assessment (PHA) is a multi-component process that will ensure service members are ready for deployment, ensure individual medical readiness data is recorded, and deliver evidence-based clinical preventive services
- The PHA is required on an annual basis for all active duty and reserve Coast Guard personnel
- PHAs will be done by birth month
- Beginning 01 Jan 2009, the PHA is mandatory for all CG AD who are enrolled to a CG clinic; Reserve personnel near a CG clinic are also required to have a PHA

PHA Mandate

- Annual multi-service requirement required by 2005 congressional law
- Ensures service members are ready for deployment,
- Ensures individual medical readiness data is recorded
- Delivers evidence-based clinical preventive services
- DOBMERB, commissioning, enlistment, retirement, confinement, RELAD, aviation, LSO, and dive will still be required
- Routine 5-year physical examinations will no longer be required for active duty and reserve

PHA Mandate

- Reservist on less than 31 days active duty and active duty personnel not enrolled to a CG clinic will need to call the Reserve Health Readiness Program (RHRP) to make their appointment
 - PHAs will not be performed at a CG clinic for these individuals
- See handout for RHRP process

What to Expect

- Prior to your appointment, you will need to complete the Navy Fleet and Marine Corps Health Risk Assessment (HRA) online
 - Should be completed before your appointment
 - Will be printed and brought with you to your appointment and will be used to guide the PHA process
- PHAs will be done in one day
 - Screenings, labs, shots, and dental exams in the morning
 - See medical officer in the afternoon if necessary

Steps to Completing the HRA

Step 1 – During your birth month (or no earlier than 2 months prior to your birth month), go to the Navy and Marine Corps Public Health Center (NMCPHC) – <http://164.167.141.36/pls/newhra/hra>. For those members that have a Navy Knowledge Online account, they can also access the HRA at the "Personal Development/Health and Wellness" page.

Step 2 – At the Health Risk Assessment (HRA) homepage, in the UIC space, enter your 7 digit OPFAC (with no dashes or spaces). For CG personnel, the OPFAC can be found on your LES or contact your local Servicing Personnel Office. For PHS officers, contact the cognizant medical administrator. Select Login.

ATC OPFAC: 7665100

Step 3 – The self-assessment consists of 21 questions and should take only a few minutes to complete. Answer all of the questions. PHS officers must select the Coast Guard as the branch of service.

Step 4 – As soon as you finish the assessment, you will receive a personalized report based on the responses provided. Print out a copy of the report to take to the PHA.

The report contains numerous links to educational material that can be opened in separate windows without closing the report. However, once the

Step 5 – Make a PHA appointment during your birth month after completing the HRA.

[illegible]


Please remember...

- Important that you complete the HRA prior to your appointment, print, and bring it with you

Chiropractic Services

- Chiropractic Health care program
- Only available for the ADMS at a designated MTF w/referral from PCM
- PCM will determine if required through screening process
- Chiropractic Services received outside of designated locations will not be covered by Tricare.
- PCM will monitor continued care
- Service is only for the ADMS!!!

For more information: www.tricare.mil



Keesler AFB

- Second largest medical center in the Air Force
- Most referrals will be sent to Keesler AFB from MTF at ATC for ADSM
- Clinical patient evaluation and counseling
- Consultation services to other providers
- Prenatal diagnostics services
- Only medical genetics center in the DOD
- Primary laboratory testing site for Cystic Fibrosis screening

For more information about Keesler AFB:
81mdg.labsystems@keesler.af.mil



Maternity Care

Tricare Standard/Extra:

- Maternity Inpatient Care Cost-Shares (mothers cost)
 - Tricare Standard coverage for maternity, prenatal care, delivery and postpartum care.
1. \$25 minimum inpatient admission charge or \$15.15 per day the daily ADFM inpatient admission charge, whichever is greater.
 2. Must call Tricare for authorization when inpatient.
 3. No referral needed.
 4. When going to a non-network provider you may have the responsibility of filing your own claims. You may also be responsible for charges up to 15% above maximum allowable charges of Tricare when seeing a non-network provider.
 5. Maternity professional fees or newborn inpatient fees are \$0.



Maternity Care Tricare Prime

- Tricare Prime also have coverage for maternity, prenatal care, delivery and postpartum.
1. Must receive a global-maternity referral to OB/GYN from PCM, this referral will cover member through out pregnancy, and one follow up visit after child birth. 18 visits with referral.
 2. OB/GYN will then be responsible for all maternity care for member.
 3. There should be no out of pocket costs for AD or ADFM for maternity care under Prime.
 4. If member chooses to seek her care outside of the network for maternity care under Prime she will be responsible for POS charges.
 5. If member chooses to change the network OB/GYN she must seek her PCM for new global-maternity referral. Once inpatient call Tricare to update hospitalization information.

Ultrasounds:
Tricare covers medically necessary ultrasounds as they must be coded by the OB/GYN. Ultrasounds are not covered for routine screening or to determine the sex of the baby. Ultrasounds must have diagnosis other than pregnancy for coverage. Members will be Responsible for charges for non-covered ultrasounds under Tricare Standard/Extra or Prime.



Behavioral Health Care

Authorized Behavioral Health Care

- Behavioral health care is a covered benefit for AD and the ADFM.
- The first 8 visits to per fiscal year without prior authorization are covered.
- After the first 8 visits prior-authorization is required. Remember to obtain care with Tricare network providers to ensure approval on authorization.

Authorized Behavioral Health Providers

1. Psychiatrists
2. Clinical psychologist
3. Certified psychiatric nurse specialist
4. Clinical social workers
5. Certified marriage and family therapist with a Tricare participation agreement.
6. Pastoral counselors with physician referral and supervision
7. Mental health counselors with physician referral and supervision
8. Licensed professional counselors with physician referral and supervision.



Behavioral Health by Value Options

Behavioral health issues are handles by Value Options. Value Options is a branch of Tricare to ensure all mental health needs for all branches of service to include the ADFM.

Value Options: 1 800 700-8646

EAP – A/D and ADFM for USCG ONLY 800 222-0364

For more information:
Tricare Choices Handbook
www.mytricare.com



Pharmacy Update

ATC Pharmacy Update

- February 2009 Clinic Formulary Available



Closing Comments / Questions

- Beneficiary feedback on clinic services, TRICARE, other topics?



February 2009

USCG ATC MOBILE PHARMACY FORMULARY LISTING

General information: 251-441-6416 Refills 441-5418

Hours: Monday to Friday 0730 to 1200 and MWThF 1300 to 1600 Closed Tuesdays at noon!

Please remember to call in your refills to 441-5418!

Please note the following guidelines:

1. **GENERIC** products are routinely dispensed when available
2. All prescriptions must be dated and signed by the provider
3. Directions must be clear; "Take as directed" is NOT recommended
4. We can not fill any medication that is not included on this list; OTC items are no longer available due to contract changes in the new fiscal year.
5. Telephone and FAX prescriptions are NOT accepted
6. A 90-day supply is available, *budget permitting*, on medications *except controlled substances*

ANALGESIC

Aspirin (EC) 81mg, 325mg tab
Darvocet N 100 tab (C-IV)
Imitrex Stat 6mg Inj. kit
Intocin 25mg cap
Lotab 5/500mg, 7.5/500mg tabs (C-III)
Maxalt 5mg, 10mg
Midrin Caps (C-IV)
Mobic 7.5mg, 15mg tabs
Motrin 200mg, 400mg, 600mg, 800mg
Motrin 100mg/5ml susp
Naprosyn 250mg, 500mg tab
Sakalate 500mg, 750mg tabs
Tylenol 35mg tabs
Tylenol drops, 160mg/5ml susp.
Tylenol #3 (C-III)
Tylox caps (C-II)
Ultram 50mg tabs

ANTINEOPLASTICS

Methotrexate 2.5mg
Nolvadex 10mg

ANTICONVULSANT

Depakote 250mg, 500mg tab
Dilantin 100mg cap
Klonopin 0.5mg tabs (C-IV)
Neurontin 100mg, 300mg, 400mg, 600mg, 800mg
Primidone 250mg tabs
Phenobarbital 30mg tab (C-IV)
Tegretol 200mg tabs

ANTICOAGULANTS

Coumadin 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 7.5mg tabs
Plavix 75mg

ANTIDEPRESSANTS

Celexa 20mg, 40mg tabs
Desyrel 50mg tabs
Elavil 10mg, 25mg, 50mg tabs
Lithium 300mg caps
Pamelor 10mg, 25mg caps
Paxil 20mg, 30mg tabs
Prozac 10mg, 20mg caps
Risperdal 0.5mg, 1mg, 4mg tabs
Seroquel 100mg, 200mg tabs
Tofranil 25mg tabs
Wellbutrin SR 100mg, 150mg tabs
Zoloft 50mg, 100mg tabs

ANTICHOLINERGIC/

CHOLINERGIC

Artane 2mg tabs
Cogentin 1mg tabs

ANTI-INFECTIVES

Amantidine 100mg caps
Amoxil 250mg, 500mg caps
Amoxil susp 250mg/5ml, 400mg/5ml
Augmentin susp 400mg/5ml, 600mg/5ml
Augmentin 500mg, 875mg tabs
Cipro 250mg, 500mg tabs
Cleocin 150mg cap
Diflucan 150mg tab (limit 12 tabs per 3 months)
Dynapen 250mg cap
Erythromycin 250mg, 333mg tab
Flagyl 250mg, 500mg tab
Gris-Peg 250mg tab
Gris-Peg 125mg/5ml susp
Hydroxychloroquine 200mg tab
Isoniazide 300mg tab
Keflex 250mg, 500mg cap
Keflex susp 250mg/5ml
Levaquin 500mg, 750mg tab
Macrobid 100mg cap
Macrobid 50mg cap
Nizoral 200mg tab
Pen VK 250mg, 500mg tabs
Septra susp
Septra DS tab
Sulfasalazine 500mg tab
Tetracycline 250mg cap
Vermox 100mg tab
Vibramycin 100mg tabs
Zithromax susp 100mg/5ml, 200mg/5ml
Zithromax 250mg tab
Zovirax 200mg cap, 800mg tab

ANXIOLYTICS

Atarax 10, 25mg tabs
Ativan 0.5mg, 1mg tab (C-IV)
Buspar 5mg, 10mg, 15mg tabs
Valium 5mg tab (C-IV)

CHOLESTEROL LOWERING

Fenoglide 120mg tab
Lopid 600mg tab
Niaspan (SR) 500mg
Pravacol 20mg, 40mg tabs
Vytorin 10/10, 10/20, 10/40, 10/80mg
Zocor 10mg, 20mg, 40mg, 80mg

CARDIOVASCULAR

Adalat CC 30mg, 60mg, 90mg tabs
Aldactone 25mg tab
Calan SR 120mg, 180mg, 240mg
Cardura 2mg, 4mg, 8mg tabs
Captopril 25mg, 50mg tabs
Catapress 0.1mg, 0.2mg, 0.3mg tabs
Chlorthalidone 25mg tabs
Cordarone 200mg tabs
Coreg 6.25mg, 12.5mg, 25mg tabs
Corgard 40mg tabs
Hydralazine 25mg tabs
Hydrochlorothiazide 25mg, 50mg
Hytrin 2mg, 5mg, 10mg caps
Inderal 10mg, 20mg, 40mg tabs
Inderal LA 80mg caps
Imdur 30mg, 60mg, tabs
Isordil 5mg, 10mg, 20mg tabs
Lanoxin 0.125mg, 0.25mg tabs
Lasix 20mg, 40mg tabs
Lisinopril 5mg, 10mg, 20mg, 40mg
Lopressor 50mg, 100mg tabs
Lotrel 5/10, 5/20, 10/20 tabs
Lozol 1.25mg, 2.5mg tabs
Maxzide 37.5/25mg, 50/75mg tab
Micardis 20mg, 40mg, 80mg tab
Minipress 1mg, 2mg, 5mg caps
Norvasc 5mg, 10mg tab
Nitrostat 0.4mg SL tab
Potassium 8meq, 10meq tabs
Tenormin 25mg, 50mg, 100mg tabs
Tiazac 120mg, 180mg, 240mg, 300mg, 360mg
Toprol XL 25mg, 50mg, 100mg tab

CONTRACEPTIVES (28 day)

Alesse/Lutera
Condoms
Loestrin 1.5/30, 1/20
Lo-Ovral
Mircette
Nor-QD
Nordette/Levlen
Norinyl/Ortho Novum 1/35
Nuvaring
Ortho-Cyclen
Ortho Novum 7/7/7
Ortho-Evra (patch)
Ortho-Tricyclin
Ortho-Tricyclin Lo
Trilevlen/Triphasil
Yasmin
Yaz

DENTAL

Lidocaine viscous 2%
Periogard soln 473ml

COUGH, COLD & ALLERGY

Atarax 10mg, 25mg tabs
Benadryl 25mg caps, syrup
Claritin 10mg tab
Epi-Pen Auto Inj.
Epi-Pen Jr Auto Inj.
Mucinex 600mg tab
Singulair 4mg, 5mg, 10mg tabs
Sudafed 30mg tab
Tessalon Perles 100mg
Zyrtec syrup 1mg/ml
Zyrtec 10mg tabs

DIABETES

Avandia 4mg, 8mg tabs
Glucophage 500mg, 850mg tabs
Glucophage XR 500mg tab
Glucotrol 5mg, 10mg tabs
Glucotrol XL 5mg, 10mg tabs
Glynase 3mg tab
Insulin Lantus, Novolog,
Novolog 70/30
NPH, Regular, 70/30
Insulin 1cc, 0.5cc syringes
Micronase 5mg tab
Precision Extra Test strips

GASTROINTESTINAL

Azulfadine 500mg tab
Bentyl 10mg, 20mg tab
Colestid 1 gram tabs
Compazine 5mg tab
Half-Lytely Bowel Prep
Imodium 2mg cap
Lactulose syrup
Levobid 0.375mg tabs
Librax 5mg/2.5mg cap
Meclizine 25mg tab
Nexium 20mg, 40mg cap
Nulytely
Phenergan 25mg tab
Phenergan 12.5mg, 25mg supp
Prilosec 20mg cap
Proctofoam HC 1%
Reglan 5mg, 10mg tabs
Zantac 150mg tab

GOUT

Benemid 500mg
Colchicine 0.6mg tab
Zyloprim 100mg, 300mg tabs

HEMATOLOGY

Coumadin 1mg, 2mg, 2.5mg, 5mg,
7.5mg tabs
Folic Acid 1mg tab
Plavix 75mg tab

HORMONES & ENDOCRINE

Evista 60mg tab
Estraderm 0.05mg, 0.1mg patch
Estratest 1.25mg/2.5mg
Estratest HS .625mg/1.25mg
Estrace 1mg, 2mg tab
Medrol Dose pack
Ogen 1.5mg tabs
Prednisone 1mg, 5mg, 10mg, 20mg tabs
Prelone 15mg/5ml syrup
Premarin 0.3mg, 0.45mg, 0.625mg,
0.9mg, 1.25mg tabs
Premarin vaginal cream
Prempo .3/1.5mg, .45/1.5mg,
.625/2.5mg, .625/5mg tabs
Provera 2.5mg, 5mg, 10mg tabs
Synthroid 0.025mg, 0.05mg, 0.075mg,
0.088mg, 0.1mg, 0.112mg, 0.125mg,
0.137mg, 0.15mg, 0.175mg, 0.2mg tabs

MUSCLE RELAXANTS

Flexeril 10mg tab
Robaxin 500mg, 750mg tab
Parafon Forte DSC 500mg tab
Valium 5mg tab (C-IV)

NASAL PREPS

Flonase
Astelrin

OPHTHALMICS

Alphagan P 0.15% soln
Ciloxin 0.3% soln
Cortisporin ophth susp
FML 0.1% soln
Gentamicin 0.3% soln
Gentamicin ophth oint
Ilotycin ophth oint
Polytrim ophth soln
Pred Forte 1% susp
Pred Mild 0.12%
Sulamyd 10% soln
Sulamyd ophth oint
Timoptic 0.5%
Timoptic XE 0.5% soln
Xalatan .005% soln

OTIC PREPS

Auralgan soln
Cipro HC otic susp
Cortisporin otic soln
Cortisporin otic susp
Floxin Otic susp.
Vosol otic soln
Vosol IIC otic soln

OSTEOPOROSIS

Boniva 150mg tab
Fosamax 70mg tab
Fosamax Plus D 2800IU/70mg tab
Fosamax Plus D 5600IU/70mg tab

RESPIRATORY

Advair 100/50mcg, 250/50, 500/50mcg
Acrochamber (limit 2)
Atrovent HFA oral inhaler
Atrovent .02% premix neb. soln
Azmecort oral inhaler
Combivent oral inhaler
Proventil 2.5mg/3ml premix neb. soln
Proventil 2mg/5ml syrup
Pulmicort Resp. .5mg/2ml amps
Serevent Diskus 50mcg
Theo-Dur 200mg, 300mg tabs
Ventolin HFA oral inhaler

PARKINSON AGENTS

Sinemet 25/100mg, 25/250mg tabs

STIMULANTS (C-II)

Adderal XR, 20mg, 30mg caps

TOPICAL

Bactroban 2% cream, oint
Cleocin T 1% soln
Efudex 5% cream
Elidel cream
Elimite cream
Gentamicin 0.1% cream, oint
Hydrocortisone 1% cream, oint
Hydrocortisone 2.5% cream, oint
Kenalog 0.1% cream, oint
Kenalog Orabase 0.1%
Lidex 0.05% cream, oint, soln.
Lotrimin 1% cream, soln
Lotrisone cream
Metrogel 1% topical
Mycolog II cream
Nizoral 2% cream, shampoo
Nystatin cream
Retin A 0.025% crm, gel (*diagnosis
required over age 35*)
Retin A 0.05% cream (*diagnosis
required over age 35*)
Silvadene 1% cream
Valisone 0.1% cream, oint, soln
Westcort 0.2% cream, oint

URINARY AGENTS

Detrol LA 4mg tab
Ditropan XL 5mg, 10mg, 15mg tabs
Macrobid 100mg caps
Macrobid 50mg caps
Proscar 5mg tab
Pyridium 100mg, 200mg tab
Uroxatral 10mg tab

VAGINAL PREPS

Cleocin 2% cream
Diffucan 150mg tab
Gynelotrimin 1% cream
Metrogel Vaginal gel
Premarin cr, 45gm

VITAMINS

Cyanocobalmin 1:1000 Inj
Ferrous Sulfate 325mg tabs
Folic Acid 1mg tab
Oscal 500mg w/D 200U tabs
*Prenatal Vitamins/ 1mg Folic Acid
(*females age 45 or less only)

PATIENT RESPONSIBILITIES REFERRAL INSTRUCTION SHEET

**--- PLEASE READ ---
VERY IMPORTANT**

1. Your PCM (Primary Care Manager) has given you a referral from this clinic to receive care from a Tricare Network provider.
2. The consult request will be forwarded to Humana (Tricare) for approval and authorization and Humana (Tricare) will determine the provider where you will have the appointment.
3. Within a few days, you should receive from Humana (Tricare) by mail, an authorization letter with a doctor's name, address, and phone number where you should call to make an appointment.

This authorization is only valid to see this provider and will state how many visits you are authorized within a 6 to 12-month period of time. Your visits are usually limited to between 1 and 3 visits in the next six months. (This number may vary depending on the reason you are being referred, i.e., x-ray or MRI = 1 visit.)

4. When you receive this authorization in the mail, it is your responsibility to call the number to schedule the appointment at your convenience.

This referral is considered to be a DIRECT ORDER.

5. Please call our Referrals office (251-441-6414) and notify us when your appointment time is scheduled.
6. Be sure to report at least 30 minutes earlier than your appointed time for registration.

Bring your approval letter from Humana/Tricare with your authorization number on it, your ID Card, medical records, if applicable, and results of any tests performed in preparation for this visit, i.e., labs, x-ray films, MRI films, etc. (pick up from where they were performed).

7. After your appointment is complete, you need to schedule a follow-up here at the ATC Clinic (251-441-6725) with your PCM for further care and management, unless advised otherwise. Please give an adequate amount of time for the report of your visit to reach our clinic (7-14 days, or sooner, if so advised.)
8. If further diagnostics or tests are needed other than the office where you are authorized these appointments, please contact the Referrals office below.
9. If you have any questions concerning this process, please contact our Referrals Office, (Ms. Jean Lulue) at 251-441-6414.

RHRP PROCESS FLOWCHART

